PTO/SB/50 (06-03)
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REISSUE PATENT APPLICATION TRANSMITTAL

	A44	lost No	1.000 0000 0000 0000						
Address to:	Attorney Doc		MIT 6917 (CMCC 450) DIV						
Mail Stan Paissus	First Named		Joseph P. Vacanti						
Mail Stop Reissue Commissioner for Patents	nt Number	6,348,069							
P.O. Box 1450	Original Pate (Month/Day/\	nt Issue Date Year)	02/19/2002						
Alexandria, VA 22313-1450	Express Mail		EL 717 745 183 US						
APPLICATION FOR REISSUE OF:									
(Check applicable box) Utility Patent Design Patent Plant Patent									
APPLICATION ELEMENTS (37 CFR 1.173) ACCOMPANYING APPLICATION PARTS									
Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee processing)	Statement of status and support for all changes to the claims. See 37 CFR 1.173(c).								
2. Applicant claims small entity status. See 37 CFR 1.27.	11. Original Patent Grant								
3. Specification and Claims in double column copy of pat (amended, if appropriate)	Ribboned Original Patent Grant								
4. Drawing(s) (proposed amendments, if appropriate)		▎┌┐╚	tatement of Loss (PTO/SB/55)						
5. Reissue Oath/Declaration (original or copy) (37 CFR 1.175) (PTO/SB/51 or 52)	12. Foreign Priority Claim (35 U.S.C. 119) (if applicable)								
6. Power of Attorney	13. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations								
7. Original U.S. Patent currently assigned? Yes (If Yes, check applicable box(es))	English Translation of Reissue Oath/Declaration 14. // // // // // // // // // // // // //								
Written Consent of all Assignees (PTO/SB/53)	15. Preliminary Amendment								
37 CFR 3.73(b) Statement (PTO/SB/96)	Return Receipt Postcard (MPEP 503) 16. (Should be specifically itemized)								
8. CD-ROM or CD-R in duplicate, Computer Program (Ap or large table	17. Other: Certificateof mailing under								
Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary)	17. Other: <u>Certificate of mailing under</u> 37 CFR 1.10; Associate Bower								
a. Computer Readable Form (CFR)	of Attorney								
b. Specification Sequence Listing on:									
i ☐ CD-ROM (2 copies) or CD-R (2 copies); or ii ☐ paper									
c. Statements verifying identity of above copies									
18. CORRESPONDENCE ADDRESS									
Customer Number: 23579	OR	Correspondence address below							
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(404) 817-8388									
Name (Print/Type) Patrea L, Pabst \ \ \ Registration No. (Attomey/Agent) 31,284									
Signature		Di	February 19, 2004						

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/56 (08-03)

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REISSUE APPLICATION FEE TRANSMITTAL FORM								Docket Number (Optional) MIT 6917 (CMCC 450) DIV RE						
Claims as Filed – Part 1														
(1) (2) (3) Small Entity								Other than a Small Entity						
	Claims in Patent	Claims Number Filed in Number Ex in Reissue		Number Extra			Fee				Rate	Fee		
Total Claims (37 CFR 1.16(j)) Independent claim	(A) ⁷	(B)	30	4.0		=	×\$9_00=		90.00				×\$=	
(37 CFR 1.16(i))		(D)	2	•	1 -	= ×\$4 3.0 €		43.00		or	١,	x\$=		
	,				Basic Fee (37 CFR 1.16(h))			\$ <u>385.00</u>					\$	
				Total Filing Fee			\$ <u>51</u> {	3:00			OR	\$		
Claims as Amended – Part 2														
(1) (2)				Γ.	_(3) Small Entity			Entity	Other than a Small Entit			mall Entity		
Claims Remair After Amendm				Highest Number Previously Paid For		С	Extra laims esent	ims Rate		Fee			Rate	Fee
Total Claims (37 CFR 1.16(j))	***		MINUS	**		* =		×\$_	=				x \$ =	
Independent Claims (37 CFR 1.16(i))	***		MINUS	****		=		×\$_	=				x\$=	
						Total Addition			ee s				OR	\$
*** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space. *** After any cancellation of claims. **** If "A" is greater than 20, use (B – A); if "A" is 20 or less, use (B – 20). ***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).											V			
Applicant claims small entity status. See 37 CFR 1.27. Column Please charge Deposit Account Number 50-1868 in the amount of \$518.00							1							
Please charge Deposit Account Number 50-1868 in the amount of \$\sum \frac{\\$5\text{10}}{\\$5\text{10}}.00 .							<u> </u>							
The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account Number 50-1868 A duplicate copy of this sheet is enclosed.														
A check in the amount of \$to cover the filing/additional fee is enclosed.									d.					
Payment by credit card. Form PTO-2038 is attached.														
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit cad information and authorization on PTO-2038.														
Febru	ary 19, 200	4						1	/	h	_			
	Date		_				•	Signa	ture of	Applica	int, A	ttorn	ney or Agent o	f Record
31,284						Patrea L. Pabst								
Registration	Number, if app	licable	-				-			Typed	or pr	inted	d name	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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CERTIFICATE OF MAILING UNDER 37 CFR §1.10

I hereby certify that this Reissue Patent Application Transmittal, and any documents referred to as attached therein, are being deposited with the United States Postal Service on this date, February 19, 2004, in an envelope as "Express Mail Post Office to Addressee" service under 37 FR 1.10, Mailing Label Number EL 717 745 183 US, addressed to Mail Stop Provisional Patent Application, Assistant Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

lean Hicks

Date: February 19, 2004

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